

APPLICATION DATA SHEET

Application Information

Application Number::	Unassigned
Filing Date::	October 16, 2003
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CFR)?::	
Number of Copies of CFR::	
Title::	ENTERIC COATED FORMULATION FOR BISPHOSPHONIC ACIDS AND SALTS THEREOF
Attorney Docket Number::	33396-187560
Request for Early Publication?::	
Request for Non-Publication?::	
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	
Latin Name::	
Variety Denomination Name::	
Petition Included?::	
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.::	

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship:: India
Country:: India
Status:: Full Capacity
Given Name:: Amar
Middle Name::
Family Name:: LULLA
Name Suffix::
City of Residence:: Cuffe Palade
State or Province of Residence:: Colabam Mumbai-5
Country of Residence:: India
Street of Mailing Address:: 103 Makel Tower "L", 10th Floor,
City of Mailing Address:: Cuffe Palade
State or Province of Mailing Address:: 103 Makel Tower "L", 10th Floor,
Country of Mailing Address:: India
Postal or Zip Code of Mailing Address:: 5

Applicant Authority Type:: Inventor
Primary Citizenship:: India
Country:: India
Status:: Full Capacity
Given Name:: Geena
Middle Name::
Family Name:: MAHOTRA
Name Suffix::
City of Residence:: Mazgaon
State or Province of Residence:: Mumbai-10
Country of Residence:: India
Street of Mailing Address:: 4 Anderson House, Opp. Mazgaon Dock Post Office

City of Mailing Address:: Mazgaon
State or Province of Mailing Address:: Mumbai-10
Country of Mailing Address:: India
Postal or Zip Code of Mailing Address:: 10

Correspondence Information

Correspondence Customer Number:: 26694
Phone Number:: (202) 344-4000
Fax Number:: (202) 344-8300
E-Mail Address:: kghaddaway@venable.com

Representative Information

Representative Customer Number:: 26694

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application is a	Continuation of	09/669,635	09/26/2000
	Continuation of		
	Continuation of		
	Continuation of		

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
India	709/BOM/99	10-20-1999	Yes
India	710/BOM/99	10-20-1999	Yes
India	23/BOM-WTO/99	10-20-1999	Yes

Assignee Information

Assignee Name:: U & I PHARMACEUTICALS LTD.
Street of Mailing Address:: 40-11 23rd Street
City of Mailing Address:: Long Island
State or Province of Mailing Address:: New York
Country of Mailing Address:: United States
Postal or Zip Code of Mailing Address:: 11101

DC2#490492